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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/578,792			ing Date 04/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL	ENTITY \square	OTHER THAN OR SMALL ENTITY			
\vdash	FOR		NUMBER FILED		NUMBER EXTRA		Г	RATE (\$)	FEE (\$)	_	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		l	N/A		1	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i), a		N/A		N/A		1	N/A		1	N/A		
	EXAMINATION FE (37 CFR 1 16(o), (p),	E	N/A		N/A		1	N/A		1	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		1	x s =		OR	x s =		
INE (37	EPENDENT CLAIM GFR 1.16(h))	IS	minus 3 =			•		X \$ =		1	X S =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawings exc sheets of paper, the application size is \$250 (\$125 for small entity) for ea additional 50 sheets or fraction there 35 U.S.C. 41(a)(1)(G) and 37 CFR 1										
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	06/21/2011	CLAIMS REMAINING AFTER AMENDMENT		NUMBE PREVIO PAID F	R	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	· 7	Minus	20		-	1	x s =		OR	x s =		
	Independent (37 CFR 1.16(h))	• 2	Minus	3			1	x \$ =		OR	X \$ =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(i))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Colu		(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus	:		-		x s =		OR	× s =		
	Independent (37 OFR 1 16(h))		Minus	*		-	1	X \$ =		OR	X \$ =		
Z	Application Size Fee (37 CFR 1.16(s))]			1			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						1			OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20", "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, pocess an application. Conhocintality is governed by St. U.S. v. 122/int 1.7 CHY 1.14. This collections seating that the 12 minutes to compare, including gathering exquired complete in form and or seagestone for reducing this burden, should be sent to the Child Information Office. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450.